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Typed or printed name

TR	ANSMITTAL FORM all correspondence after initial filling	Application Number Filing Date First Named Inventor Art Unit Examiner Name	Patent and 1 ilection of in 10/633,25 August 4, Tomoyuki 1752 Thart Che	i Ohzeki ea
I dizal Number of		NCLOSURES (Check ell	that and	
Amendme Ai Ai Extension Express Ai Information Certified Cocumen Reply to Incompleting Recompleting Re	ter Final fidavits/dectaration(s) of Time Request abandonment Request in Disclosure Statement Copy of Priority (s) fissing Parts/ a Application pply to Missing Parts ider 37 CFR 1.52 or 1.53	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocatio Change of Correspondence A Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks	Address	After Allowance Communication to To Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):
Firm Name	SIGNATUI	RE OF APPLICANT, ATTO	RNEY, C	OR AGENT
	TAIYO, NAKAJIMA & KATO			
Signature	Margaret	5 Bule		
Printed name	Margaret A. Burke			
Date	2 2 March 2	005	Reg. No.	34,474
I hereby certify th sufficient postage the date shown b	at this correspondence is being as first class mail in an envelo	FIFICATE OF TRANSMISS facsimile transmitted to the USPT the addressed to: Commissioner for	O or depos	ILING sited with the United States Postal Service with P.O. Box 1450, Alexandria, VA 22313-1450 on

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PTO/SB/17 (12-04v2)
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((110 4040)	Complete if Known										
Fees pursuant to t				633,253								
FEE	IAL	Filing Date	Aug	just 4, 2003								
For FY 2005				First Named In	ventor Ton	noyuki Ohzek	<u>i</u>					
				Examiner Name CH		HEA, THORL						
Applicant claims small entity status. See 37 CFR 1.27			Art Unit 1752		2							
TOTAL AMOUNT OF PAYMENT (\$) 570.00			Attorney Docke	ket No. FSF-031431								
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Moncy Order None Other (please identify):												
Deposit Account Deposit Account Number: 501322 Deposit Account Name: TAIYO, NAKAJIMA & KATO												
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)												
Charge fee(s) Indicated below Charge fee(s) indicated below, except for the filing fee												
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments												
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card												
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		UD EVARINATI	ON EEES		-							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES												
Application_T	Vpe Fee (Small Entity E) Fee (\$)	Fee (\$	Small Entity 1 Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)					
Utility	300	150	500	250	200	100						
Design	200	100	100	50	130	65						
Plant	200	100	300	150	160	80						
Reissue	300	150	500	250	600	300						
Provisional	200	100	0	0	0	0						
2. EXCESS CL		200	_			<u> </u>	Small Entity					
Fee Description	n					<u>Fee (\$)</u> 50	Fee (\$) 25					
	ver 20 (includin		aiaanaa)			200	100					
	ndent claim over endent claims	A gincluding K	eissues)			360	180					
Total Claims	ependent Claims											
	Extra 6 0 or HP = 5			250 (\$)		Fee (\$)	Fee Paid (\$)					
HP = highest num	nber of total claims p	aid for, if greater tha		0-1-1-(*)								
Indep. Claims	or HP = 1	laims Fee x 20		: Paid (\$) 200								
HP = highest num	ber of independent c	laims paid for, if gre	ater than 3.									
3. APPLICATION	ON SIZE FEE	ns exceed 100 c	sheets of na	ner (excluding	electronical	ly filed seaue	nce or computer					
listings un	der 37 CFR 1.52	(e)), the applica	stion size fe	e due is \$250 (5	\$125 for sm	all entity) for	each additional 50					
sheets or f	raction thereof.	Sec 35 H.S.C. 4	11/a)(1)(G)	and 37 CFR 1.1	16(s).							
Total Sheet		<u> </u>	mber of eac	h additional 50 (or fraction th whole numbe	<u>iereof Fee</u> er) x	(\$) <u>Fee Pald (\$)</u>					
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)												
Other (e.g., late filing surcharge): Extension Fee (\$120.00)												
SUBMITTED BY												
ignature	2011	875	0	Registration No.	34,474	Telepho	ne 703-416-0376					
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This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officor, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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